

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751156

FILED
Feb 24, 2009
Secretary of State

Entity Name: FAIRWAY COVE HOMES ASSOCIATION, INC.

Current Principal Place of Business:

C/O J & L PROPERTY MANAGEMENT, INC.
10191 WEST SAMPLE RD., STE. 203
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

C/O J & L PROPERTY MANAGEMENT, INC.
10191 WEST SAMPLE RD., STE. 203
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 59-2795763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDERAZZO, JAMES
10191 W. SAMPLE ROAD
SUITE 203
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KIRILOFF, MICHELE
Address: 9855 FAIRWAY COVE LANE
City-St-Zip: PLANTATION, FL 33324

Title: VPD () Delete
Name: TRACHTENBERG, LEE
Address: 9877 FAIRWAY COVE LANE
City-St-Zip: PLANTATION, FL 33324

Title: PD () Delete
Name: TOKAR, CHRIS,
Address: 9896 FAIRWAY COVE LANE
City-St-Zip: PLANTATION, FL 33324

Title: T () Delete
Name: MODLIN, SCOTT
Address: 9815 FAIRWAY COVE LANE
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: FINNEK, HOWARD
Address: 9381 FAIRWAY COVE LANE
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: KIRILOFF, MICHELE
Address: 9855 FAIRWAY COVE LANE
City-St-Zip: PLANTATION, FL 33324

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FINNK, HOWARD
Address: 9381 FAIRWAY COVE LANE
City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES CALDERAZZO

RA

02/24/2009

Electronic Signature of Signing Officer or Director

Date